

Report No.: J099-RP
Rev. No.: 0
Work Assignment No.: 019-2JZZ
Contract No.: 68-WP-0051
August 21, 1992

Reviewed: 12/7/92
Reviewed: MLaHca
Recommend: SEA

218399



Ms. Sandy Foose
U.S. Environmental Protection Agency
Region 2
Edison, New Jersey 08837

Dear Ms. Foose:

After review of the available information for the Environmental Priorities Initiative Preliminary Assessment (PA), Gusmer Corporation, a recommendation of **SITE EVALUATION ACCOMPLISHED (SEA)** is proposed. This PA is authorized under Work Assignment No. 019-2JZZ. Gusmer Corporation is located at One Gusmer Drive in Lakewood, Ocean County, New Jersey and has the EPA ID No. NJD002181394 (Ref. No. 1). The facility manufactures pumping equipment (Ref. No. 2). The recommendation is based on the following findings:

- On August 18, 1980, Gusmer Corporation filed a Notification of Hazardous Waste Activity Form (Ref. No. 1).
- On October 9, 1980, the U.S. EPA issued an Acknowledgement of Notification of Hazardous Waste Activity to Gusmer Corporation (Ref. No. 3).
- On October 15, 1980, Gusmer Corporation filed EPA Form 3510 in which it described its business as a manufacturer of pumping, proportioning, and dispensing equipment and related accessories (Ref. No. 2).
- On April 9, 1981, the New Jersey Department of Environmental Protection (NJDEP) conducted a Resource Conservation and Recovery Act (RCRA) inspection of Gusmer Corporation. The inspection forms indicate that the company was a generator of hazardous waste and a treatment, storage, or disposal facility (TSDF). At the time of the inspection there were twelve 55-gallon drums of waste methylene chloride, twenty 5-gallon pails of unknown chemical waste, and four 55-gallon drums of waste oil on site. Concerns noted by the NJDEP inspector were that some waste was not identified, some drums containing waste oil appeared to be leaking, one waste storage area was 15 feet from a storm sewer, and waste had been stored on site for 18 months. The inspector indicated that Gusmer Corporation seemed unfamiliar with regulations covering TSDFs, and that the facility had apparently filed as a TSDF to protect itself (Ref. Nos. 4; 5, pp. 1, 2, 7).
- On April 10, 1981, per instructions from the U.S. EPA, Gusmer Corporation requested a change of status from TSDF to generator only (Ref. No. 6).
- On March 3, 1983, the NJDEP informed Gusmer Corporation that based on the facility's storage of hazardous waste for less than 90 days, it was classified as a generator only and no longer subject to TSDF requirements (Ref. No. 7).
- On July 30, 1992, an on-site reconnaissance at Gusmer Corporation was conducted. During the reconnaissance it was noted that all waste drums were intact. Waste drums are currently being stored on a concrete pad in a temporary 90-day storage area that is

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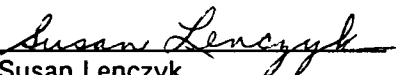
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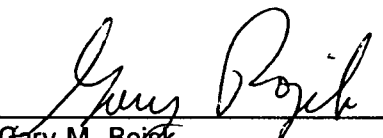
covered and locked. A new 90-day storage area is being constructed that is covered, locked, and bermed. The new area is due to be completed in approximately 1 week. There was no evidence of spills on site from current or former practices. According to the site representative, a waste drum that in 1981 was noted by the NJDEP as not being intact had been stored on a concrete pad in the former drum storage area (currently the temporary drum storage area). The site representative stated that the drum in question was leaking due to a loose bung and that all the oil was contained on the top of the drum. The NJDEP inspection form does not describe the drum in detail, nor does it indicate that the contents were leaking onto the ground (Ref. Nos. 4; 5, p. 7; 8).

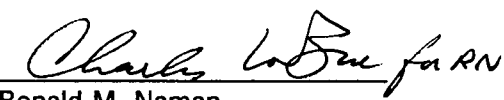
The storm drain observed by the NJDEP, which was 15 feet from the drum storage area, showed no signs of staining. During the on-site reconnaissance, it was noted that the drain discharged to a retention basin, which showed no signs of staining or stressed vegetation (Ref. No. 8).

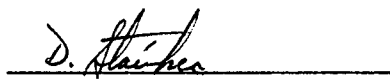
In summary, Gusmer Corporation at one time technically functioned as a TSDF, due to its storage of hazardous waste for a period exceeding 90 days. However, it was delisted from a TSDF to a generator only when it began to ship its wastes within 90 days. An on-site reconnaissance revealed no incidents of spills or other improper storage of hazardous wastes. These findings substantiate the recommendation of SEA.

Very truly yours,


Susan Lenczyk
SITE MANAGER


Gary M. Rojek
PROJECT MANAGER


Ronald M. Naman
SUBCONTRACT OFFICE MANAGER


Dennis Stainken, Ph. D.
WORK ASSIGNMENT MANAGER

SITE RECORD REGION II FY:	DATES----WAM:	TDM:	DUE:
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NAME: *Gusmer Corporation* EPA ID: *NJDO02/81394* STATE ID:
EVENT TYPE: *EPIPA* EVENT DATE: *8/21/92* LEAD: *ARN* COUNTY: *Ocean* ST: *NJ*
EVENT QUALIFIER: *SEA* RECOMMENDED ACTION:
(PA, SI, ESI, HRS, RA, RI/FS, DEFER TO RCRA OR NRC, OTHER)
PATHWAY SCORES GW: *Ø* SW: *Ø* AIR: *Ø* SE/DC: *Ø* TOTAL: *Ø N/A*
COMMENTS: *Protective file for TSD; reclassified as generator only -*
NO reason to suspect problems/spills.
PATHWAYS OF CONCERN:
LIKELIHOOD OF SCORING:
i. Actual/Obs. release:
ii. Targets (primary, secondary):
iii. Hazardous Waste Characteristics:
Additional information requirements:
Adequacy of information: (H=able to score, M=maybe, L=unlikely)
Notification of:
(Removal, Remedial, State, Fed. Facility, RCRA, NRC, Other)
REVIEWER: *Mary Latka* SIGNATURE *Mary Latka* COMP. DATE: *12/7/92*
POST REVIEW EVENTS--RCRA CHECK: STATE CONCURS:

Site manufactures pumping equipment & sent in RCRA form as a "protective file" in 1980. Site was re-classified to "generator only" status in 1983. 7/92 on-site inspection showed good housekeeping practices & that the facility was complying w/ necessary generator regulation (in fact, a new drum storage area was being built during the inspection). Recommend SEA, as no threats posed by site based on site history & recent recon.

ML

ATTACHMENT A

REFERENCES

1. U.S. Environmental Protection Agency (EPA), Notification of Hazardous Waste Activity, EPA Form 8700-12, filed by Gusmer Corporation (NJD002181394), August 15, 1980.
2. U.S. EPA, Consolidated Permits Program, EPA Forms 3510-1 and 3510-3, Gusmer Corporation (NJD002181394), October 15, 1980.
3. U.S. EPA, Acknowledgement of Notification of Hazardous Waste Activity, Gusmer Corporation (NJD002181394), October 9, 1980.
4. New Jersey Department of Environmental Protection (NJDEP), RCRA Generator Inspection Form for Gusmer Corporation, April 9, 1981.
5. NJDEP, RCRA Treatment, Storage and Disposal Facility Inspection Form for Gusmer Corporation, April 9, 1981.
6. Letter from Frederick W. Martin, Executive Vice President, Gusmer Corporation, to Ms. Amy Perlof, Information Service Center, U.S. EPA, April 10, 1981, with amended U.S. EPA Notification of Hazardous Waste Activity.
7. Letter from Frank Coolick, Chief, Bureau of Hazardous Waste Engineering, NJDEP, Division of Waste Management, to Frederick W. Martin, Executive Vice President, Gusmer Corporation, March 3, 1983.
8. Field Notebook No. HNUS 035, Gusmer Corporation, J099-RP, On-Site Reconnaissance, HALLIBURTON NUS Environmental Corporation, Iselin, New Jersey, July 30, 1992.

REFERENCE NO. 1

U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTALLATION'S EPA I.D. NO.
I. NAME OF INSTALLATION
II. INSTALLATION MAILING ADDRESS
III. LOCATION OF INSTALLATION

PLEASE PLACE LABEL IN THIS SPACE

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

FOR OFFICIAL USE ONLY

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED
(yr., mo., & day)

F N J D 0 0 2 1 8 1 3 9 4 2 1

8 0 0 8 1 8

I. NAME OF INSTALLATION

GUSMER CORPORATION

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

3 ONE GUSMER DRIVE

CITY OR TOWN

4 LAKEWOOD

ST. ZIP CODE

NJ 08701

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

5 ONE GUSMER DRIVE

CITY OR TOWN

6 LAKEWOOD

ST. ZIP CODE

NJ 08701

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

PHONE NO. (area code & no.)

2 MARTIN, FREDERICK W. EXEC. VP

201-370-9000

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

8 GUSMER CORPORATION

B. TYPE OF OWNERSHIP
(enter the appropriate letter into box)F - FEDERAL
M - NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☒ A. GENERATION☐ B. TRANSPORTATION (complete Item VII)☒ C. TREAT/STORE/DISPOSE☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR☐ B. RAIL☐ C. HIGHWAY☐ D. WATER☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION☐ B. SUBSEQUENT NOTIFICATION (complete Item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

9	W	N	J	D	0	0	2	1	8	1	3	9	4	2	1
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F001	2 F002	3 F012	4	5	6
7	8	9	10	11	12

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 P106	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

<input type="checkbox"/> 1. IGNITABLE (D001)	<input type="checkbox"/> 2. CORROSIVE (D002)	<input type="checkbox"/> 3. REACTIVE (D003)	<input type="checkbox"/> 4. TOXIC (D000)
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X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Frederick W. Martin

NAME & OFFICIAL TITLE (type or print)

FREDERICK W. MARTIN
EXECUTIVE VICE-PRESIDENT

DATE SIGNED

8/15/80

REFERENCE NO. 2

ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION		EPA FORM NUMBER
Consolidated Permits Program Read the General Instructions before starting.		F NJD 002181394
PLEASE PLACE LABEL IN THIS SPACE		GENERAL INSTRUCTIONS If a preprinted label has been provided with this form, it is to be placed in the designated space for the information carefully. If any information is not provided through it, and enter the correct information in the appropriate space below. The information of the preprinted data is not to be entered in the left of the label space. The information that should appear in the label space is the property of the EPA. The information that is complete and correct for the information items (I, II, III, IV, V, and VI) except IV, B, which must be completed regardless of the information items (I) and (II) has been provided. Refer to the instructions for detailed information and for the level of information under which the data is collected.

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any question, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column. If the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements, see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.		
A. Is this facility a publicly owned treatment works which results in a discharge of waters of the U.S.? (FORM 2A)	YES NO	FORM 2A ATTACHED
B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	YES NO	FORM 2B ATTACHED
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)	YES NO	FORM 2C ATTACHED
D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	YES NO	FORM 2D ATTACHED
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	YES NO	FORM 3 ATTACHED
F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one-quarter mile of the well bore, underground sources of drinking water? (FORM 4)	YES NO	FORM 4 ATTACHED
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)	YES NO	FORM 4 ATTACHED
H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	YES NO	FORM 4 ATTACHED
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	YES NO	FORM 5 ATTACHED
J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	YES NO	FORM 5 ATTACHED

III. NAME OF FACILITY	GUSMER CORPORATION
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IV. FACILITY CONTACT	A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
1	FREDERICK W MARTIN EXEC VP	201 370 9000

V. FACILITY MAILING ADDRESS	A. STREET OR P.O. BOX	B. CITY OR TOWN	C. STATE	D. ZIP CODE
3	ONE GUSMER DRIVE	LAKEWOOD	NJ	08701

VI. FACILITY LOCATION	A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME	C. CITY OR TOWN	D. STATE	E. ZIP CODE	F. COUNTY CODE (if known)
5	ONE GUSMER DRIVE	OCEAN	LAKEWOOD	NJ	08701	USA

3561

(specify) **MACHINERY MANUFACTURING**

(specify)

THIRD

(specify)

(specify)

VI. OPERATOR INFORMATION

NAME

GUSMER CORPORATION

NAME

U.S. OPERATOR (Enter the appropriate letter in the answer box. Use other as specified.)

PUBLIC (other than federal or state)

P (specify)

OTHER (specify)

PHONE

201 370 9000

STREET OR BOX

ONE GUSMER DRIVE

CITY OR TOWN

LAKEWOOD

STATE

NJ

ZIP CODE

08730

INDIAN LAND

YES

NO

VII. EXISTING ENVIRONMENTAL PERMITS

1. Air (Pollution Control Act)

9. N/A

10. N/A

11. N/A

12. N/A

13. N/A

14. N/A

15. N/A

16. N/A

17. N/A

18. N/A

19. N/A

20. N/A

21. N/A

22. N/A

23. N/A

24. N/A

25. N/A

26. N/A

27. N/A

28. N/A

29. N/A

30. N/A

31. N/A

32. N/A

33. N/A

34. N/A

35. N/A

36. N/A

37. N/A

38. N/A

39. N/A

40. N/A

41. N/A

42. N/A

43. N/A

44. N/A

VIII. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers, and other surface water bodies in the map area. See instructions for precise requirements.

F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

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F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

F9: A/S1

IX. NATURE OF BUSINESS (provide a brief description)

MANUFACTURE PUMPING, PRECONDITIONING, AND DISPENSING EQUIPMENT AND RELATED ACCESSORIES.

XIII. CERTIFICATION (see Instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)

FREDERICK W. MARTIN

EXECUTIVE VICE-PRESIDENT

B. SIGNATURE

Frederick W. Martin

C. DATE SIGNED

10/15/80

COMMENTS FOR OFFICIAL USE ONLY

FORM 3	EPA HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program (This information is required under Section 3006 of RCRA.)	EPA I.D. NUMBER FWJD00218139431
RCRA		

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)	COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)		2. NEW FACILITY (Complete item below.)	
<input checked="" type="checkbox"/> 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)		FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN	
FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)		YR. MO. DAY	
8		79 01 22	
B. REVISED APPLICATION (place an "X" below and complete item I above)		2. FACILITY HAS A RCRA PERMIT	
<input type="checkbox"/> 1. FACILITY HAS INTERIM STATUS		<input type="checkbox"/> 2. FACILITY HAS A RCRA PERMIT	

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:		Treatment:	
CONTAINER (barrel, drum, etc.)	S01 GALLONS OR LITERS	TANK	T01 GALLONS PER DAY OR LITERS PER DAY
TANK	S02 GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02 GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03 CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03 TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR
SURFACE IMPOUNDMENT	S04 GALLONS OR LITERS	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04 GALLONS PER DAY OR LITERS PER DAY
Disposal:			
INJECTION WELL	D79 GALLONS OR LITERS		
LANDFILL	D80 ACRE-Feet (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER		
LAND APPLICATION	D81 ACRES OR HECTARES		
OCEAN DISPOSAL	D82 GALLONS PER DAY OR LITERS PER DAY		
SURFACE IMPOUNDMENT	D83 GALLONS OR LITERS		
UNIT OF MEASURE	CODE	UNIT OF MEASURE	CODE
GALLONS	G	LITERS PER DAY	V
LITERS	L	TONS PER HOUR	D
CUBIC YARDS	Y	METRIC TONS PER HOUR	W
CUBIC METERS	C	GALLONS PER HOUR	E
GALLONS PER DAY	U	LITERS PER HOUR	H
ACRE-Feet	F	ACRE-Feet	A
HECTARE-METER	F	HECTARE-METER	F
ACRES	B	ACRES	B
HECTARES	Q	HECTARES	Q

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY	FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)				1. AMOUNT	
X-1	S 0 2	600	G	5			
X-2	T 0 3	20	E	6			
1	S 0 1	2,200,000	G	7			
2				8			
3				9			
4				10			

II. PROCESSES (continued)

SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE

POUNDS
TONS

CODE

P
T

METRIC UNIT OF MEASURE

KILOGRAMS
METRIC TONS

CODE

K
M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

PROCESSES**1. PROCESS CODES:**

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4 the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.

2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

SAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZ. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY									
W M J D 0 0 2 1 8 1 3 9 4 3 1										W M J D 0 0 2 1 8 1 3 9 4 3 1									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)										D. PROCESSES									
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	1. PROCESS CODES (enter)				2. PROCESS DESCRIPTION (if a code is not entered in D(1))											
				27 - 28	29 - 30	31 - 32	33 - 34	35 - 36	37 - 38	39 - 40	41 - 42								
1	F001	900000	P	S01															
2	F002	50000	P	S01															
3	F012	10000	P	S01															
4	P106	100000	P	S01															
5																			
6																			
7																			
8																			
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15																			
16																			
17																			
18																			
19																			
20																			
21																			
22																			
23																			
24																			
25																			
26																			

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)**E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.**

EPA I.D. NO. (enter from page 1)													
F	N	J	D	0	0	2	1	8	1	3	9	T/A	C
1	2	3	4	5	6	7	8	9	10	11	12	13	14

F6: $\frac{A}{55}$ F6: $\frac{A}{56}$ **V. FACILITY DRAWING**

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)						LONGITUDE (degrees, minutes, & seconds)					
40	03	17	0			074	10	57	0		
65	66	67	68	69	71	78	79	80	81	82	83

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

FREDERICK W. MARTIN
EXECUTIVE VICE-PRESIDENT

B. SIGNATURE

Frederick W. Martin

C. DATE SIGNED

10/15/80

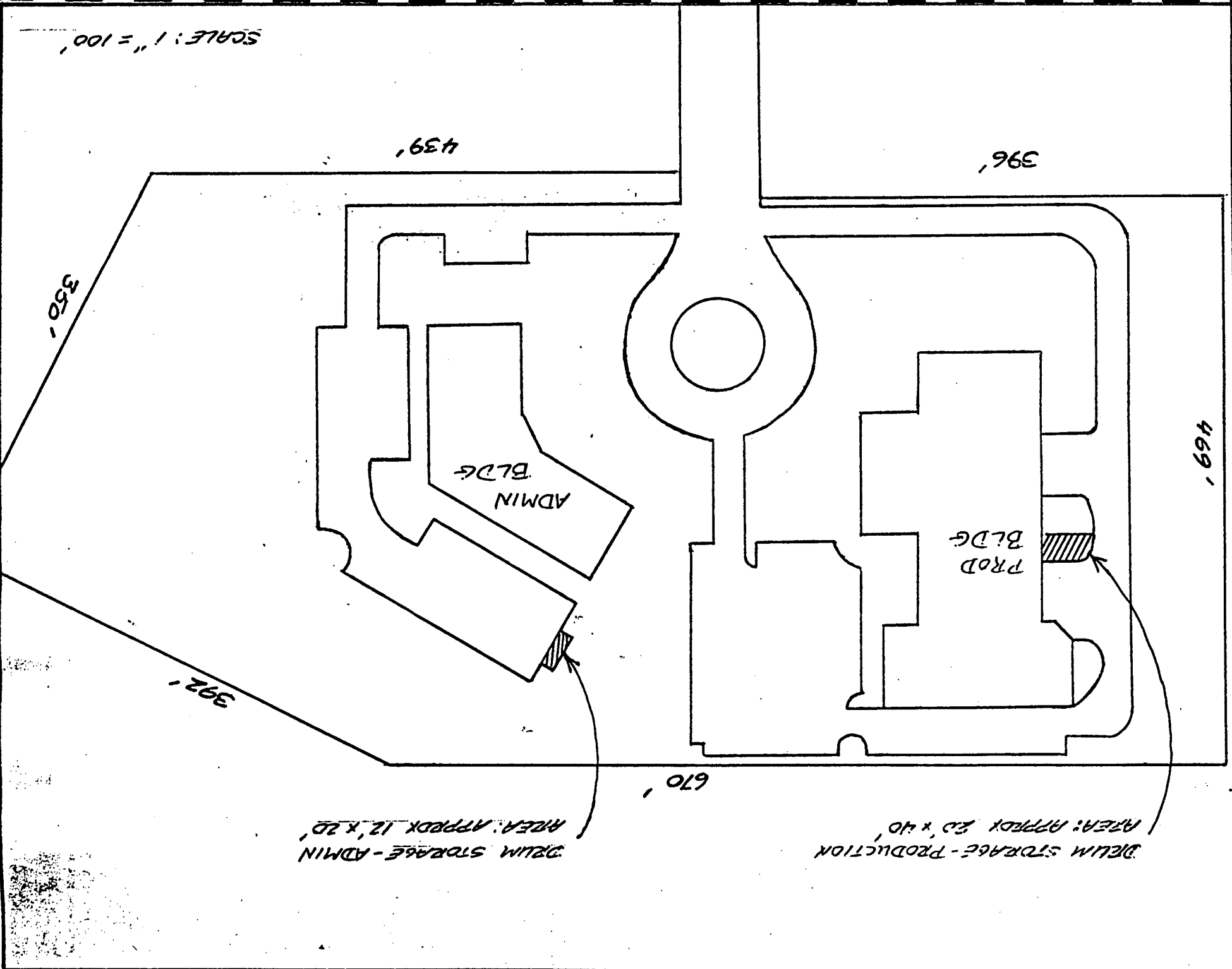
X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED



REFERENCE NO. 3



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

NJD002181394

**GUSHER CORPORATION
ONE GUSHER DRIVE
LAKEWOOD**

NJ 08701

INSTALLATION ADDRESS

**ONE GUSHER DRIVE
LAKEWOOD**

NJ 08701

REFERENCE NO. 4

RCRA GENERATOR INSPECTION FORM

313

COMPANY NAME:

Acumen Corp.

COMPANY ADDRESS:

One Acumen Dr. Lakewood

COMPANY CONTACT OR OFFICIAL:

Tom Viehl

TITLE:

EPA I.D. NUMBER:

NTD 002181394

INSPECTOR'S NAME:

Tom Downey

BRANCH/ORGANIZATION:

NTDEP

CHECK IF FACILITY IS ALSO A TSD

FACILITY ☒

DATE OF INSPECTION:

4/9/81

YES

NO

DON'T
KNOW

(1) Is there reason to believe that the facility has hazardous waste on site? ☒ ☐ ☐

a. If yes, what leads you to believe it is hazardous waste?
Check appropriate box:

☒ Company admits that its waste is hazardous during the inspection.

☒ Company admitted the waste is hazardous in its RCRA notification and/or Part A Permit Application.

☐ The waste material is listed in the regulations as a hazardous waste from a nonspecific source (\$261.31)

☐ The waste material is listed in the regulations as a hazardous waste from a specific source (\$261.32)

☐ The material or product is listed in the regulations as a discarded commercial chemical product (\$261.33)

☐ EPA testing has shown characteristics of ignitability, corrosivity, reactivity or extraction procedure toxicity, or has revealed hazardous constituents (please attach analysis report)

☐ Company is unsure but there is reason to believe that waste materials are hazardous. (Explain)

RECEIVED
MAY 14 11 32 AM '81
ENVIRONMENTAL PROTECTION
AGENCY
NEW YORK, N.Y. 10007

YESNODON'T
KNOW

- b. Is there reason to believe that there are hazardous wastes on-site which the company claims are merely products or raw materials?

1 1 X

Please explain:

- c. Identify the hazardous wastes that are on-site, and estimate approximate quantities of each.

12, 55 drums of waste methylene chloride
20, 5 gallon pails of unknown chemical waste

- d. Describe the activities that result in the generation of hazardous waste.

Manufacture pumping and dispensing equipment for foam insulation. Solvent used to clean equipment.

- (2) Is hazardous waste stored on site?

X — —

- a. What is the longest period that it has been accumulated?

18 months

- b. Is the date when drums were placed in storage marked on each drum?

— X —

- (3) Has hazardous waste been shipped from this facility since November 19, 1980?

X — —

- a. If "yes," approximately how many shipments were made?

1

- (4) Approximately how many hazardous waste shipments off site have been made since November 19, 1980?

One

- a. Does it appear from the available information that there is a manifest copy available for each hazardous waste shipment that has been made?

X — —

- b. If "no" or "don't know," please elaborate.

	<u>YES</u>	<u>NO</u>	<u>DON'T KNOW</u>
c. Does each manifest (or a representative sample) have the following information?			
- a manifest document number	<u>X</u>	—	—
- the generator's name, mailing address, telephone number, and EPA identification number	<u>X</u>	—	—
- the name, and EPA identification number of each transporter	<u>X</u>	—	—
- the name, address and EPA identification number of the designated facility and an alternate facility, if any:	<u>X</u>	—	—
- a description of the wastes (DOT)	<u>X</u>	—	—
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded into or onto the transport vehicle	<u>X</u>	—	—
- a certification that the materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation under regulations of the Department of Transportation and the EPA	<u>X</u>	—	—
(5) Were there any hazardous wastes stored on site at the time of the inspection?	<u>X</u>	—	—
a. If "yes," do they appear properly packaged (if in containers) or, if in tanks, are the tanks secure?	—	<u>X</u>	—
b. If not properly packaged or in secure tanks, please explain. <i>Integrity questionable on some drums</i> <i>Some material in 5 gallon pail</i>			
c. Are containers clearly marked and labelled?	<u>X</u>	<u>X</u>	—
d. Do any containers appear to be leaking?	<u>X</u>	—	—
e. If "yes," approximately how many?			

*(6) Has the generator submitted an annual report to EPA covering the previous calendar year? *NA*

a. How do you know?

(7) Has the generator received signed copies (from the TSD facility) of all manifests for wastes shipped off site more than 35 days ago? *X*

a. If "no," have Exception Reports been submitted to EPA covering these shipments?

(8) General comments.

Susmer Corp. seemed to have little if any knowledge of what regulation a TSD facility should comply with. It seems that they may have went with this classification just to buy time and cover themselves. According to Mrs. Vieth, Susmer will probably contact EPA and request to be reclassified as only a generator once they remove whatever remaining waste they have on site.

* The effective date for this requirement is March 1, 1982.

REFERENCE NO. 5

RCRA TREATMENT, STORAGE AND DISPOSAL FACILITY INSPECTION FORM
FOR TSD FACILITIES ONLY

COMPANY NAME:

Sumner Corp.

COMPANY ADDRESS:

One Sumner Dr. Lehigh, NJ.

COMPANY CONTACT OR OFFICIAL:

Tom Vieth

EPA I.D. Number:

NJ 2002181394

OTHER ENVIRONMENTAL PERMITS HELD

BY FACILITY: ☐ NPDES None

☐ AIR

☐ OTHER

TITLE:

Maintenance Supervisor

INSPECTOR'S NAME:

Tom Denny

DATE OF INSPECTION:

4/9/81

BRANCH/ORGANIZATION:

NSDEP

TIME OF DAY INSPECTION TOOK PLACE:

1400

(1) Is there reason to believe that the facility has hazardous waste on site? Yes

a. If yes, what leads you to believe it is hazardous waste?
Check appropriate box:

☒ Company admits that its waste is hazardous during the inspection.

☒ Company admitted the waste is hazardous in its RCRA notification and/or Part A Permit Application.

☐ The waste material is listed in the regulations as a hazardous waste from a nonspecific source (\$261.31)

☐ The waste material is listed in the regulations as a hazardous waste from a specific source (\$261.32)

☐ The material or product is listed in the regulations as a discarded commercial chemical product (\$261.33)

☐ EPA testing has shown characteristics of ignitability, corrosivity, reactivity or extraction procedure toxicity, or has revealed hazardous constituents (please attach analysis report)

☐ Company is unsure but there is reason to believe that waste materials are hazardous. (Explain)

YES NO DON'T
KNOW

b. Is there reason to believe that there are hazardous wastes on-site which the company claims are merely products or raw materials?

X

Please explain:

c. Identify the hazardous wastes that are on-site, and estimate approximate quantities of each.

12,55 gallon drums of methylene chloride

about 20, five gallon pails of unknown chem. waste

(2) Does the facility generate hazardous waste?

X

(3) Does the facility transport hazardous waste?

X

(4) Does the facility treat store or dispose of hazardous waste?

X

Reviewed By: Wage Hunt

VISUAL OBSERVATIONS

- | | YES | NO | DON'T
KNOW |
|---|----------|----------------|---------------|
| (5) <u>SITE SECURITY</u> (\$265.14) | | | |
| a. Is there a 24-hour surveillance system? | — | <u>X</u> | — |
| b. Is there a suitable barrier which completely surrounds the active portion of the facility? | <u>X</u> | — | — |
| c. Are there "Danger-Unauthorized Personnel Keep Out" signs posted at each entrance to the facility? | — | <u>X</u> | — |
| (6) Are there ignitable, reactive or incompatible wastes on site? (\$265.27) | — | YES | <u>X</u> |
| a. If "YES", what are the approximate quantities? | | | |
| b. If "YES", have precautions been taken to prevent accidental ignition or reaction of ignitable or reactive waste? | — | — | — |
| c. If "YES", explain | | | |
| * d. In your opinion, are proper precautions taken so that these wastes do not: | | | |
| - generate extreme heat or pressure, fire or explosion, or violent reaction? | — | — | <u>X</u> |
| - produce uncontrolled toxic mists, fumes, dusts, or gases in sufficient quantities to threaten human health? | — | — | <u>X</u> |
| - produce uncontrolled flammable fumes or gases in sufficient quantities to pose a risk of fire or explosions? | — | — | <u>X</u> |
| - damage the structural integrity of the device or facility containing the waste? | — | — | <u>X</u> |
| - threaten human health or the environment? | — | — | <u>X</u> |
| <i>About 20, five gallon containers hold unidentified waste</i> | | | |

Please explain your answers, and comment if necessary.

- e. Are there any additional precautions which you would recommend to improve hazardous waste handling procedures at the facility?
More storage area away from storm sewer. One wash storage area is about 15 ft from storm sewer, other is about 40 ft away.
- (7) Does the facility comply with preparedness and prevention requirements including maintaining: (\$265.32)

	YES	NO	DON'T KNOW
- an internal communications or alarm system?	X	—	—
- a telephone or other device to summon emergency assistance from local authorities?	X	—	—
- portable fire equipment?	X	—	—
- adequate aisle space?	—	X	—
- in your opinion, do the types of wastes on site require all of the above procedures, or are some not needed? Explain.	—	—	X

In your opinion, do the types of wastes on site require all of the above procedures, or are some not needed? Explain.

All required

*(8) Have you inspected to verify that the groundwater monitoring wells (if any) mentioned in the facility's groundwater monitoring plan (see no. 19 below) are properly installed? *NA*

If you have, please comment, as appropriate.

(9) a. Is there any reason to believe that groundwater contamination already exists from this facility? If "YES", explain. *X*

b. Do you believe that operation of this facility may affect groundwater quality? *X*

c. If "YES", explain.

See comment under 6.e

RECORDS INSPECTION

(10) Has the facility received hazardous waste from an off-site source since Nov. 19, 1980 (effective date of the regulations)? *X*

a. If "YES", does it appear that the facility has a copy of a manifest for each hazardous waste load received?

b. How many post-November 19 manifests does it have? (If the number is large, you may estimate) *21*

c. Does each manifest (or a representative sample) have the following information?

- a manifest document number *X*

* This requirement applies only after November 19, 1981.

	<u>YES</u>	<u>NO</u>	<u>KNOW</u>
- the generator's name, mailing address, telephone number, and EPA identification number	<u>X</u>	—	—
- the name, and EPA identification number of each transporter	<u>X</u>	—	—
- the name, address and EPA identification number of the designated facility and an alternate facility, if any;	<u>X</u>	—	—
- a DOT description of the wastes	<u>X</u>	—	—
- the total quantity of each hazardous waste by units of weight or volume, and the type and number of containers as loaded into or onto the transport vehicle	<u>X</u>	—	—
- a certification that the materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation under regulations of the Department of Transportation and the EPA	<u>X</u>	—	—
d. Are there any indications that unmanifested hazardous wastes have been received since November 19, 1980? If YES, explain.	—	<u>X</u>	—
(11) Does the facility have a written waste analysis plan specifying test methods, sampling methods and sampling frequency? (\$265.13)	—	<u>X</u>	—
a. Does the character of wastes handled at the facility change from day to day, week to week, etc., thus requiring frequent testing? (You may check more than one) Waste characteristics vary _____ All wastes are basically the same _____ Company treats all waste as hazardous _____ Don't Know _____	—	<u>X</u>	—
b. Does hazardous waste come to this facility from off-site sources?	—	<u>X</u>	—
c. If waste comes from an off-site source, are there procedures in the plan to insure that wastes received conform to the accompanying manifest? <i>NA</i>	—	—	—
(12) <u>INSPECTIONS</u> (\$265.15)			
a. Does the facility have a written inspection schedule?	—	<u>X</u>	—
b. Does the schedule identify the types of problems to be looked for and the frequency for inspections?	—	<u>X</u>	—
c. Does the owner/operator record inspections in a log?	—	<u>X</u>	—
d. Is there evidence that problems reported in the inspection log have not been remedied? If "YES," please explain.	—	—	—

(13) PERSONNEL TRAINING (\$265.16)

a. Is there written documentation of the following:

- job title for each position at the facility related to hazardous waste management and the name of the employee filling each job? X
- type and amount of training to be given to personnel in jobs related to hazardous waste management? X
- actual training or experience received by personnel? X

(14) Does the facility have a written contingency plan for emergency procedures designed to deal with fires, explosion or any unplanned release of hazardous waste? X
(\$265.51)

- a. Does the plan describe arrangements made with local authorities? X
- b. Has the contingency plan been submitted to local authorities? X
How do you know?

- c. Does the plan list names, addresses, and phone numbers of Emergency Coordinators? X
- d. Does the plan have a list of what emergency equipment is available? X
- e. Is there a provision for evacuating facility personnel? X
- f. Was an Emergency Coordinator present or on call at the time of the inspection? X

(15) Does the owner/operator keep a written operating record with: (\$265.73)

- a description of wastes received with methods and dates of treatment, storage or disposal? X
- location and quantity of each waste? X
- detailed records and results of waste analysis and treatability tests performed on wastes coming into the facility? X
- detailed operating summary reports and description of all emergency incidents that required the implementation of the facility contingency plan? X

*(16) Does the facility have written closure and post-closure plans? (\$265.110) NA

a. Does the written closure plan include:

- a description of how and when the facility will be partially (if applicable) and ultimately closed?

* Effective date for this requirement is May 19, 1981.

- an estimate of the maximum inventory of wastes in storage or treatment at any time during the life of the facility? _____
- a description of the steps necessary to decontaminate facility equipment during closure? _____
- a schedule for final closure including the anticipated date when wastes will no longer be received and when final closure will be completed? _____
- b. What is the anticipated date for final closure? _____
- tc. Does the owner/operator have a written post-closure plan identifying the activities which will be carried on after closure and the frequency of these activities? _____
- d. Does the written post-closure plan include:
 - a description of planned groundwater monitoring activities and their frequencies during post-closure? _____
 - a description of planned maintenance activities and frequencies to ensure integrity of final cover during post-closure? _____
 - the name, address and phone number of a person or office to contact during post-closure? _____
- *(17) Does the owner/operator have a written estimate of the cost of closing the facility? (\$265.142) What is it? *NA* _____
- *(18) Does the owner/operator have a written estimate of the cost for post-closure monitoring and maintenance? What is it? (\$265.144) *NA* _____
- *(19) Has a groundwater monitoring plan been submitted to the Regional Administrator for facilities containing a surface impoundment, landfill or land treatment process? (This requirement does not apply to recycling facilities.) (\$265.90) *NA* _____
 - a. Does the plan indicate that at least one monitoring well has been installed hydraulically upgradient from the limit of the waste management area? _____
 - b. Does the plan indicate that there are at least three monitoring wells installed hydraulically downgradient at the limit of the waste management area? _____

† This section applies only to disposal facilities.

* Effective date for this requirement is May 19, 1981.

SITE-SPECIFIC

Please circle all appropriate activities and answer questions on indicated pages for all activities circled. When you submit your report, include only those site-specific pages that you have used.

<u>STORAGE</u>	<u>TREATMENT</u>	<u>DISPOSAL</u>
Waste Pile p. 9	Tank p. 8	Landfill pp. 10-11
Surface Impoundment p. 8	Surface Impoundment pp. 8-9	Land Treatment pp. 9, 10
Container p. 7	Incineration pp. 12-13	Surface Impoundment p. 8
Tank, above ground p. 8	Thermal Treatment pp. 12-13	Other _____
Tank, below ground p. 8	Land Treatment pp. 9-10	
Other _____	Chemical, Physical p. 13 and Biological Treatment (other than in tanks, surface impoundment or land treatment facilities)	YES NO DON'T KNOW
	Other _____	

CONTAINERS (\$265.170)

- * 1. Are there any leaking containers?
If "YES", explain. X — —
Some drums containing waste oil appeared to be leaking.
2. Are there any containers which appear in danger of leaking?
If "YES", explain. X — —
Drum integrity was questionable on some drums containing waste oil.
3. Do wastes appear compatible with container materials? X — —
4. Are all containers closed except those in use? X — —
5. Do containers appear to be opened, handled or stored in a manner which may rupture the containers or cause them to leak? — X —
6. How often does the plant manager claim to inspect container storage areas? *daily*
7. Does it appear that incompatible wastes are being stored in close proximity to one another?
If "YES", explain. — — X
Some waste is not identified
8. Are containers holding ignitable or reactive wastes located at least 15 meters (50 feet) from the facility's property line? X — —
9. What is the approximate number and size of containers with hazardous wastes?

*12, 55 gallon drums methyl chloride
20, 5 gallon pails, unknown
4, 55 gallon waste oil*

- | <u>TANKS (\$265.190)</u> | <u>YES</u> | <u>NO</u> | <u>DON'T
KNOW</u> |
|---|------------|-----------|-----------------------|
| 1. Are there any leaking tanks?
If "YES", explain. | — | — | — |
| 2. Are there any tanks which appear in danger of
leaking.
If "YES", explain. | — | — | — |
| 3. Are wastes or treatment reagents being
placed in tanks which could cause them to
rupture, leak, corrode or otherwise fail?
If "YES", explain. | — | — | — |
| 4. Do uncovered tanks have at least 2 feet
of freeboard or an adequate containment
structure? | — | — | — |
| 5. Where hazardous waste is continuously
fed into a tank, is the tank equipped with
a means to stop this inflow? | — | — | — |
| 6. Does it appear that incompatible wastes
are being stored in close proximity to one
another, or in the same tank?
If "YES", explain. | — | — | — |
| 7. How often does the plant manager claim to
inspect container storage areas? | — | — | — |
| 8. Are ignitable or reactive wastes stored in
a manner which protects them from a source
of ignition or reaction?
If "YES", explain. | — | — | — |
| 9. What is the approximate number and size of
tanks containing hazardous wastes? | — | — | — |

- | <u>SURFACE IMPOUNDMENTS (\$265.220)</u> | <u>YES</u> | <u>NO</u> | <u>DON'T
KNOW</u> |
|--|------------|-----------|-----------------------|
| 1. Is there at least 2 feet of freeboard
in the impoundment? | — | — | — |
| 2. Do all earthen dikes have a protective
cover to preserve their structural integrity?
If "YES", specify type of covering. | — | — | — |
| 3. Is there reason to believe that incompatible
wastes are being placed in the same surface
impoundment?
If "YES", explain. | — | — | — |

4. Are ignitable or reactive wastes being placed in surface impoundments without being treated to remove these characteristics?
If "YES", explain.

5. Are there any leaks, failures or is there any deterioration in the impoundments?
If "YES", explain.

6. Give the approximate size of surface impoundments (gallons or cubic feet).

WASTE PILES (\$265.250)

1. Is the waste pile protected from wind erosion?
a. Does it appear to need such protection?
b. Explain what type of protection exists.
2. Does it appear that incompatible wastes are being stored in the same waste pile?
If "YES", explain.
3. Is leachate run-off from a pile a hazardous waste?
If "YES", explain this determination and answer (a) and (b) below.
a. Is the pile placed on an impermeable base that is compatible with the waste?
b. Is the pile protected from precipitation and run-on?
4. In your judgment, are ignitable or reactive wastes managed in such a way that they are protected from any material or conditions which may cause them to ignite?
Please explain or indicate if no such wastes are present.

Are they placed on an existing pile so that they no longer meet the definition of ignitable or reactive waste?
Please explain.

5. How many waste piles are on site, and approximately how large are they?

LAND TREATMENT (\$265.270)

1. Can the facility operator demonstrate that the hazardous waste has been made less of non-hazardous by biological degradation or chemical reactions occurring in or on the soil?
Please explain.

- | | | | |
|---|-----|-----|-----|
| *2. Is run-on diverted away from the active portions of the land treatment facility? | ___ | ___ | ___ |
| *3. Is run-off collected? | ___ | ___ | ___ |
| 4. Are food chain crops being grown on the facility property? | ___ | ___ | ___ |
| a. If "YES", can the facility operator document that arsenic, lead and mercury: | ___ | ___ | ___ |
| - will not be transferred to the crop or ingested by food chain animals or | ___ | ___ | ___ |
| - will not occur in greater concentrations in the crops grown on the land treatment facility than in the same crops grown on untreated soils. | ___ | ___ | ___ |
| b. Has notification of the growing of the food chain crops been made to the Regional Administrator? | ___ | ___ | ___ |
| 5. Is there a written and implemented plan for unsaturated zone monitoring? | ___ | ___ | ___ |
| 6. Are there records of the application dates, application rates, quantities and location of each hazardous waste placed in the facility? | ___ | ___ | ___ |
| 7. Do the closure and post-closure plans address: | ___ | ___ | ___ |
| a. control of migration of hazardous wastes into the groundwater? | ___ | ___ | ___ |
| b. control of run-off, release of airborne particulate contaminants? | ___ | ___ | ___ |
| c. compliance with requirements for the growth of food-chain crops (if they are present)? | ___ | ___ | ___ |
| 8. Is ignitable or reactive waste immediately incorporated into the soil so the resulting waste no longer meets that definition? If "YES", explain. | ___ | ___ | ___ |
| 9. Are incompatible wastes placed in the same land treatment area? If "YES", explain. | ___ | ___ | ___ |
| 10. What is the area of the land receiving hazardous waste treatment? | ___ | ___ | ___ |

LANDFILLS (\$265.300)

- | | | | |
|--|-----|-----|-----|
| *11. Is run-on diverted away from the active portions of the landfill? | ___ | ___ | ___ |
| *12. Is run-off from active portions of the landfill collected? | ___ | ___ | ___ |

* Effective date for these requirements is May 19, 1981.

† These requirements are effective November 19, 1981.

	<u>YES</u>	<u>NO</u>	<u>NOT</u>
3. Is waste which is subject to wind dispersal controlled? Explain.	_____	_____	_____
4. Does the owner/operator maintain a map with:			
- the exact location and dimensions of each cell	_____	_____	_____
- the contents of each cell and approximate location of each hazardous waste type	_____	_____	_____
5. Do the closure and post-closure plans address:			
- control of pollutant migration via ground water?	_____	_____	_____
- control of surface water infiltration?	_____	_____	_____
- prevention of erosion?	_____	_____	_____
6. Is ignitable or reactive waste treated before being placed in the landfill? Explain how you know.	_____	_____	_____
7. Are precautions taken to insure that incompatible wastes are not placed in the same landfill cell? If "NO", explain.	_____	_____	_____
8. Are bulk or non-containerized wastes containing free liquids placed in the landfill? If "YES",	_____	_____	_____
a. Does the landfill have a liner which is chemically and physically resistant to the added liquid?	_____	_____	_____
b. Is the waste treated and stabilized so that free liquids are no longer present?	_____	_____	_____
*9. Are containers holding liquid waste or waste containing free liquids placed in the landfill?	_____	_____	_____
10. Are empty containers (e.g. those containing less than 1/2 inch of liquid) placed in the landfills?	_____	_____	_____
If so, are they crushed flat, shredded or similarly reduced in volume before they are buried?	_____	_____	_____
11. What is the approximate area of the hazardous waste landfill?			

* Effective date for this requirement is November 19, 1981.

INCINERATORS AND THERMAL TREATMENT

(\$\$265.340 and 265.379)

YES NO DON'T
KNOW

1. What type of incinerator or thermal treatment is at the site (e.g. waterwall incinerator, boiler, fluidized bed, etc.)?

2. Was hazardous waste being incinerated or thermally treated during your inspection?
If "YES", answer all following questions.
If "NO", answer only questions 3 and 7.

3. Has waste analysis been performed (and written records kept) to include:

- heating value of the waste

- halogen content

- sulfur content

- concentration of lead

- concentration of mercury

NOTE: Waste analysis need not be performed on each waste load if if there are documented data available to show waste characteristics that do not vary. If there are such documented data available, check here ☐.

4. Does it appear that the owner/operator brings his thermal treatment process to steady state (normal) conditions of operation before introducing hazardous wastes?

5. Did it appear during your inspection that there was adequate monitoring and inspection by owner/operator every 15 minutes during hazardous waste incineration for:

- waste feed

- auxiliary fuel feed

- air flow

- incinerator temperature

- scrubber flow

- scrubber pH

- relevant level controls

-Every hour for:

- stack plume (color and opacity)

5. Is there open burning of hazardous waste?

a. If "YES", what is being burned?
(only burning or detonation
of explosives is permitted)

b. If open burning or detonation of explosives is taking
place, approximately what is the distance from the open
burning or detonation to the property of others?

YES NO DON'T
KNOW

6. Does the incinerator appear to be operating
properly? (Do emergency shutdown controls
and system alarms seem to be in good working
order?) Please explain.

a. Is there any evidence of fugitive emissions?

7. Is the residue from the incinerator treated
by the owner as a hazardous waste?
Please explain.

8. What types of air pollution control devices (if any)
are installed on the incinerator?

CHEMICAL, PHYSICAL AND BIOLOGICAL TREATMENT (\$265.400)

1. Does the treatment process system show any
signs of ruptures, leaks, or corrosion?
Please explain.

2. Is there a means to stop the inflow of
continuously-fed hazardous wastes?

3. Is there ignitable or reactive waste fed
into the treatment system?

If "YES", has it been treated or protected
from any material or conditions which may
cause it to ignite or react? If so,
explain how.

Are the incompatible wastes placed in
the same treatment process?
If "YES", explain.

5. Describe the treatment system at this facility.

REFERENCE NO. 6

GUSMER
CORPORATION

FREDERICK W. MARTIN
Executive Vice President

NJD 002181394

Amend -
del TSD

April 10, 1981

Ms. Amy Perlof
Information Service Center
US EPA
26 Federal Plaza
New York, New York 10278

OK
done
4/13/81
af

Dear Ms. Perlof:

Per telephone instructions from your office to our Tom Viohl this morning, enclosed please find copies of our submitted EPA Forms 8700-12 (6-80) and 3510-1 (6-80) with amendments indicated in red, showing the status change of Gusmer Corporation, EPA #NJD002181394, to that GENERATION only.

We request that you make the appropriate adjustments to your records.

Sincerely,

GUSMER CORPORATION

Frederick W. Martin

Frederick W. Martin
Executive Vice President

FWM:db
encl.

I.D. - FOR OFFICIAL USE ONLY												
3												
W												
1	2	3	4	5	6	7	8	9	10	11	12	13

X. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1 F 1 1 1 23 - 26	2 F 1 1 2 23 - 26	3 F 1 1 2 23 - 26	4	5	6
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31 7 1 1 6 23 - 26	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

Frederick W. Martin

NAME & OFFICIAL TITLE (type or print)

FREDERICK W. MARTIN
EXECUTIVE VICE-PRESIDENT

DATE SIGNED

8/15/80

FORM

U.S. ENVIRONMENTAL PROTECTION AGENCY

I. EPA I.D. NUMBER

1
GENERAL

EPA

GENERAL INFORMATION

Consolidated Permits Program

(Read the "General Instructions" before starting.)

F N 5 D 0 0 2 1 B 1 3 3 1

LABEL ITEMS

I. EPA I.D. NUMBER

III. FACILITY NAME

V. FACILITY MAILING ADDRESS

VI. FACILITY LOCATION

AMENDED 4/10/81
Frederick W. Martin
EXEC VICE PRESIDENT

PLEASE PLACE LABEL IN THIS SPACE

MAILED 12/1/81

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS

MARK 'X'

YES NO FORM ATTACHED

A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)

X

C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)

X

E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)

No - X

G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)

X

I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)

X

B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)

X

D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)

X

F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well, bore, underground sources of drinking water? (FORM 4)

X

H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)

X

J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)

X

III. NAME OF FACILITY

1 SKIP GUSMER CORPORATION

IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)

B. PHONE (area code & no.)

2 FREDERICK W MARTIN EXEC VP

201 370 9000

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX

3 ONE GUSMER DRIVE

B. CITY OR TOWN

4 LAKEWOOD

C. STATE

D. ZIP CODE

NJ

08701

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER

5 ONE GUSMER DRIVE

B. COUNTY NAME

OCEAN

C. CITY OR TOWN

6 LAKEWOOD

D. STATE

E. ZIP CODE

F. COUNTY CODE (if known)

NJ

08701

USA

ED FROM THE FRONT

CODES (4-digit, in order of priority)

A. FIRST

B. SECOND

3561

(specify)

MACHINERY MANUFACTURING

7

(specify)

C. THIRD

D. FOURTH

(specify)

7

(specify)

I. OPERATOR INFORMATION

A. NAME

GUSMER CORPORATION

B. Is the name listed in Item VIII-A also the owner?

☒ YES ☐ NO

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F - FEDERAL
S - STATE
P - PRIVATE

M - PUBLIC (other than federal or state)
O - OTHER (specify)

P (specify)

D. PHONE (area code & no.)

C

A

201 370 9000

E. STREET OR P.O. BOX

NE GUSMER DRIVE

F. CITY OR TOWN

LAKEWOOD

G. STATE

NJ

H. ZIP CODE

08730

IX. INDIAN LAND

Is the facility located on Indian lands?

☐ YES ☒ NO

EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)

D. PSD (Air Emissions from Proposed Sources)

N/A

N/A

B. UIC (Underground Injection of Fluids)

E. OTHER (specify)

N/A

N/A

C. RCRA (Hazardous Wastes)

E. OTHER (specify)

N/A

N/A

MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility; the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements. *sent site plans + attached to go*

II. NATURE OF BUSINESS (provide a brief description)

MANUFACTURE PUMPING, PRECONDITIONING, AND DISPENSING EQUIPMENT AND RELATED ACCESSORIES

III. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE (type or print)

FREDERICK W. MARTIN
EXECUTIVE VICE-PRESIDENT

B. SIGNATURE

Frederick W. Martin

C. DATE SIGNED

10/15/80

COMMENTS FOR OFFICIAL USE ONLY

REFERENCE NO. 7



State of New Jersey

DEPARTMENT OF ENVIRONMENTAL PROTECTION

DIVISION OF WASTE MANAGEMENT

32 E. Hanover St., CN 027, Trenton, N.J. 08625

JACK STANTON
DIRECTOR

March 3, 1983

LINO F. PEREIRA
DEPUTY DIRECTOR

Gusmer Corporation
ATTN: Frederick W. Martin
Executive Vice President
One Gusmer Drive
Lakewood Industrial Park
Lakewood, NJ 08701

RE: Facility Operating Status

Dear Sir:

9H
firms
3/10/83

The Bureau of Hazardous Waste Engineering has reviewed your company's response to the Notice of Violation, Failure to Submit Annual Report. The Bureau finds that the response contains adequate information to determine the operating status of this facility with respect to N.J.A.C. 7:26-1 et seq., the New Jersey Hazardous Waste Management Regulations. The Bureau has determined that the company's hazardous waste treatment, storage or disposal facility as delineated in the company's RCRA Part A application and identified by the following EPA ID Number:

EPA ID NO. NJD002181394

has been excluded from regulations under N.J.A.C. 7:26-1.1 et seq. because your facility accumulates hazardous waste on-site for less than 90 days. This exclusion classifies your facility solely as a generator provided the following conditions are complied with:

1. All such waste is, within 90 days or less, shipped off-site to an authorized facility or placed in an on-site authorized facility, as defined at N.J.A.C. 7:26-1.4.
2. The waste is placed in containers which meet the standards of N.J.A.C. 7:26-7.2 and are managed in accordance with N.J.A.C. 7:26-9.4(d).
3. The date upon which each period of accumulation begins is clearly marked and visible for inspection on each container.
4. The generator complies with the requirements for owners and operators of N.J.A.C. 7:26-9.6 and 9.7 concerning preparedness and prevention, contingency plans and emergency procedures as well as N.J.A.C. 7:26-9.4(g) concerning personnel training.

New Jersey Is An Equal Opportunity Employer

5. For bulk accumulation of dry hazardous waste materials, the waste pile is managed according to the following:

- (i) The waste pile is no larger than 200 cubic yards; and
- (ii) The pile shall be placed on an impermeable base that is compatible with the waste; and
- (iii) Run-on shall be diverted away from the pile; and
- (iv) Any leachate and run-off from the pile must be collected and managed as a hazardous waste.

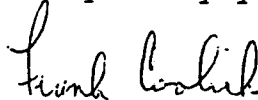
This written acknowledgement of the exclusion of the above identified facility from N.J.A.C. 7:26-1 et seq. is based expressly on the review of the aforementioned correspondence. This letter makes no claim as to the extent and physical condition of the actual hazardous waste activities occurring at the site mentioned above.

Your company's hazardous waste facility above is no longer included in DEP's list of "existing facilities" (see N.J.A.C. 7:26-1.4 and 12.3) and therefore does not need to conform with the interim operating requirements of N.J.A.C. 7:26-1 et seq. for "existing facilities" which would include the TSD facility annual report. It is the company's responsibility to operate within the conditions listed above. To operate a hazardous waste facility without prior approval from the DEP is a violation of the Solid Waste Management Act N.J.S.A. 13:1E-1 et seq.

As a result of the conclusions previously made, the Notice of Violation entitled "Failure to Submit Annual Report" signed by Mr. David Shotwell is rescinded and need not be complied with.

If you have any questions on this matter, please call my office at (609) 292-9880.

Very truly yours,



Frank Coolick, Chief
Bureau of Hazardous Waste Engineering

FC:jb

cc Dave Shotwell
NJDEP, Division of Waste Management

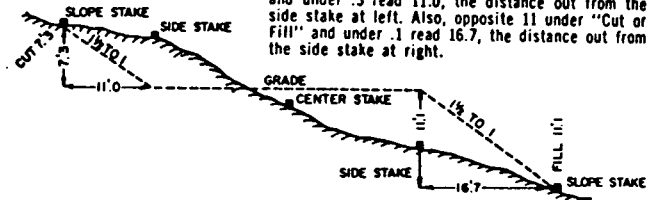
Tom Taccone
USEPA, Region II

REFERENCE NO. 8

DISTANCES FROM SIDE STAKES FOR CROSS-SECTIONING

Roadway of any Width. Side Slopes 1½ to 1.

In the figure below: opposite 7 under "Cut or Fill" and under .3 read 11.0, the distance out from the side stake at left. Also, opposite 11 under "Cut or Fill" and under .1 read 16.7, the distance out from the side stake at right.



Cut or Fill	Distance out from Side or Shoulder Stake										Cut or Fill
	0	.1	.2	.3	.4	.5	.6	.7	.8	.9	
0	0.0	0.2	0.3	0.5	0.6	0.8	0.9	1.1	1.2	1.4	0
1	1.5	1.7	1.8	2.0	2.1	2.3	2.4	2.6	2.7	2.9	1
2	3.0	3.2	3.3	3.5	3.6	3.8	3.9	4.1	4.2	4.4	2
3	4.5	4.7	4.8	5.0	5.1	5.3	5.4	5.6	5.7	5.9	3
4	6.0	6.2	6.3	6.5	6.6	6.8	6.9	7.1	7.2	7.4	4
5	7.5	7.7	7.8	8.0	8.1	8.3	8.4	8.6	8.7	8.9	5
6	9.0	9.2	9.3	9.5	9.6	9.8	9.9	10.1	10.2	10.4	6
7	10.5	10.7	10.8	11.0	11.1	11.3	11.4	11.6	11.7	11.9	7
8	12.0	12.2	12.3	12.5	12.6	12.8	12.9	13.1	13.2	13.4	8
9	13.5	13.7	13.8	14.0	14.1	14.3	14.4	14.6	14.7	14.9	9
10	15.0	15.2	15.3	15.5	15.6	15.8	15.9	16.1	16.2	16.4	10
11	16.5	16.7	16.8	17.0	17.1	17.3	17.4	17.6	17.7	17.9	11
12	18.0	18.2	18.3	18.5	18.6	18.8	18.9	19.1	19.2	19.4	12
13	19.5	19.7	19.8	20.0	20.1	20.3	20.4	20.6	20.7	20.9	13
14	21.0	21.2	21.3	21.5	21.6	21.8	21.9	22.1	22.2	22.4	14
15	22.5	22.7	22.8	23.0	23.1	23.3	23.4	23.6	23.7	23.9	15
16	24.0	24.2	24.3	24.5	24.6	24.8	24.9	25.1	25.2	25.4	16
17	25.5	25.7	25.8	26.0	26.1	26.3	26.4	26.6	26.7	26.9	17
18	27.0	27.2	27.3	27.5	27.6	27.8	27.9	28.1	28.2	28.4	18
19	28.5	28.7	28.8	29.0	29.1	29.3	29.4	29.6	29.7	29.9	19
20	30.0	30.2	30.3	30.5	30.6	30.8	30.9	31.1	31.2	31.4	20
21	31.5	31.7	31.8	32.0	32.1	32.3	32.4	32.6	32.7	32.9	21
22	33.0	33.2	33.3	33.5	33.6	33.8	33.9	34.1	34.2	34.4	22
23	34.5	34.7	34.8	35.0	35.1	35.3	35.4	35.6	35.7	35.9	23
24	36.0	36.2	36.3	36.5	36.6	36.8	36.9	37.1	37.2	37.4	24
25	37.5	37.7	37.8	38.0	38.1	38.3	38.4	38.6	38.7	38.9	25
26	39.0	39.2	39.3	39.5	39.6	39.8	39.9	40.1	40.2	40.4	26
27	40.5	40.7	40.8	41.0	41.1	41.3	41.4	41.6	41.7	41.9	27
28	42.0	42.2	42.3	42.5	42.6	42.8	42.9	43.1	43.2	43.4	28
29	43.5	43.7	43.8	44.0	44.1	44.3	44.4	44.6	44.7	44.9	29
30	45.0	45.2	45.3	45.5	45.6	45.8	45.9	46.1	46.2	46.4	30
31	46.5	46.7	46.8	47.0	47.1	47.3	47.4	47.6	47.7	47.9	31
32	48.0	48.2	48.3	48.5	48.6	48.8	48.9	49.1	49.2	49.4	32
33	49.5	49.7	49.8	50.0	50.1	50.3	50.4	50.6	50.7	50.9	33
34	51.0	51.2	51.3	51.5	51.6	51.8	51.9	52.1	52.2	52.4	34
35	52.5	52.7	52.8	53.0	53.1	53.3	53.4	53.6	53.7	53.9	35
36	54.0	54.2	54.3	54.5	54.6	54.8	54.9	55.1	55.2	55.4	36
37	55.5	55.7	55.8	56.0	56.1	56.3	56.4	56.6	56.7	56.9	37
38	57.0	57.2	57.3	57.5	57.6	57.8	57.9	58.1	58.2	58.4	38
39	58.5	58.7	58.8	59.0	59.1	59.3	59.4	59.6	59.7	59.9	39
40	60.0	60.2	60.3	60.5	60.6	60.8	60.9	61.1	61.2	61.4	40

HNUS Ø35

Quasar Corporation
Lakewood NJ
J099-RP
7/30/92

TABLE OF CONTENTS

On-site Reconnaissance
Site Map
Photograph Log

page

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Date of survey 8/11/92

Susan Lenczyk 7/31/92 ①

Susan Lenczyk 7/31/92



VISITOR PASS

NAME

NICHOLAS J. KIOES

TO SEE

DATE

7/30

REPRESENTING

HNUS / USEPA

TIME IN

1008

☒ AM
☐ PM

TIME OUT

☐ AM
☐ PMCAMERAS PROHIBITED
Waiver

In consideration of PMC, INC. granting me permission to enter its property, I agree to not make any claim or demand that I may have now or in the future, arising out of, or relating to, injury or damage I may sustain or which may be sustained in connection with any of my property or to property owned by another subject to my control due to any of the following causes:

1. My negligence (regardless of any negligence on the part of PMC, INC.
2. Any obvious hazard or danger.
3. Any of my actions which are not reasonably related to my purpose for being on this property.
4. Events or occurrences beyond the control of PMC, INC.

SIGNED

NJK

DATE

7/30/92



VISITOR PASS

NAME

Susan Lenczyk

TO SEE

Mr. Fred Martin

DATE

July 30, 1992

REPRESENTING

HALLIBURTON NUS Env. Corp.

TIME IN

1000

☒ AM
☐ PM

TIME OUT

☐ AM
☐ PMCAMERAS PROHIBITED
Waiver

In consideration of PMC, INC. granting me permission to enter its property, I agree to not make any claim or demand that I may have now or in the future, arising out of, or relating to, injury or damage I may sustain or which may be sustained in connection with any of my property or to property owned by another subject to my control due to any of the following causes:

1. My negligence (regardless of any negligence on the part of PMC, INC.
2. Any obvious hazard or danger.
3. Any of my actions which are not reasonably related to my purpose for being on this property.
4. Events or occurrences beyond the control of PMC, INC.

SIGNED

Susan Lenczyk

DATE

7/30/92

in connection with any of my property or to property owned by another subject to my control due to any of the following causes:

1. My negligence (regardless of any negligence on the part of PMC, INC.
2. Any obvious hazard or danger.
3. Any of my actions which are not reasonably related to my purpose for being on this property.
4. Events or occurrences beyond the control of PMC, INC.

SIGNED

NOR

DATE

7/30/92

SIGNED

Susan Lenecke

DATE

7/30/92

Guano Corporation
Delwood New Jersey
5099-RB

On-site Reconnaissance

Sunday, July 30, 1992

ALLIGATOR NOS Environmental Corp. personnel present during

work:

Susan Lenecke at 7/30/92
NO, NC (RX) 7/30/92

Water Conditions: Approx. 85°F, heavy, strong current.

Winds 0-5 mph.

All have read the work plan and understand the assignment and QA responsibilities.

Canoe 734744 ports

734743 abate

OVA - 729633 HNC - 729622

radiation det monitor 7 734667

52 Arrive at Guano Corporation

54 Preparing air monitoring instruments.

Monitor 4 - 11 cpm

OVA - background - 0 cpm

HNC - " 0 cpm

2 Entering Administration Building, where we signed

visitor passes. Met Mr. Jack Martin, Executive

Vice President.

Susan Lenecke 7/30/92

Susan Lenecke 7/30/92

Susan Lenecke 7/30/92



FREDERICK W. MARTIN
Division Executive Vice President



One Gusmer Drive, Lakewood, New Jersey 08701-0110
Phone: (908) 370-9000 1-800-367-4767 Fax (908) 905-8968
Telex 132-497 Cable: Gusmer, Lakewood, N.J.

I asked about the note on
the visitor's pass that
said "Cameras Prohibited".
He said we could take
photographs.

sl 8/10/92

Gusmer Corporation
Lakewood, NJ
J099-RP
7/30/92

1006 We met in Mr. Martin's office briefly, where I explained why we were here and what we needed to see.

1008 Proceeding to Production Building. En route, Mr. Martin explains that Gusmer Corp. is in the process of enclosing its 90-day storage area. It should be ready in roughly a week or so.

1011 Stop at Suburban to pick up air monitoring instruments and Monitor 4. Mr. Martin said that Gusmer Corporation manufactures pumping equipment that proportion and dispenses two components chemicals or materials.

1012 Proceeding around Manufacturing Building to back where there is a new drum storage area, to be opened shortly (in 1 week or so).

1015 1P-1 - Empty drums to be used for hazardous waste or chip disposal.

15-1
1P-2 - newly constructed ^{90-day} drum storage area.

15-2
Area is watertight, covered, and bermed. There are empty drums at one end for hazardous waste or chip disposal. They will be stored in the area that is currently empty (1P-2).

David H. Sarge 8/11/92

Susan Lenczyk 7/30/92

Susan Lenczyk 7/30/92

the note on
re that
Prohibited
could take

7/30/92

Gusmer Corporation
Lakewood, NJ
J099-RP
7/30/92

1016 Entered Production Building, where Mr. Martin pointed out a satellite area where they keep a waste drum.

1P-3 Satellite area where waste is accumulated
15-3 in drum.

1017 Reading of 2 ppm on OVA on top of waste drum.
15 ppm on OVA in machine shop.

1019 1P-4 & 1P-5 - Another satellite area
15-4 & 15-5 for waste accumulation in drums. (assembly area)

1021 Walking through assembly area. Mr. Martin confirmed that most of the waste generated is waste oil and waste solvents. There is another satellite area here where a waste drum is temporarily stored.

1P-6 - Photo of satellite area
15-6

OVA - 150 ppm off the drum
4-6 ppm in breathing zone

1025 Proceeding to temporary drum storage area near the administration building. This area is

Don't miss 8/11/92

Susan Lenczyk 7/30/92

Susan Lenczyk 7/30/92

Gusmer Corporation
Lakewood, NJ
J099-RP
7/30/92

the 90-day storage area. The drums are intact on a concrete pad. Mr. Martin noted that the oldest drum is dated June 9, 1992. The newest is July 30, 1992. The area is fenced, locked, and covered.

IP-7 - Temporary drum storage area.
Beyond (adjacent to) the temporary drum storage area is an electrical generator fired by diesel fuel.

1029 Note IP-8, 15-8
Propane tank for heat recovery unit. Tank sits on concrete blocks & is fenced.

Two piles of roof tar are on the curb outside the tank area.

1030 Noted a storm drain ^(approx. 15 feet away) near the electrical generator and drum storage area.

Runoff from the driveway runs into this drain, which discharges to a retention basin.

IP-9 - Storm drain.

IP-10 - Retention basin.
15-10

Mr. Martin said that the property extends approximately 50 feet beyond the propane tank. This area is wooded. No signs

Susan Lenczyk 7/30/92

Base & coverage 8/11/92

Susan Lenczyk 7/30/92

(11)

Guamer Corporation
Lakewood NJ
J099-RP
7/30/92

of stressed vegetation or stained soil.

1032 Mr. Martin said that Guamer Corporation built this facility. Previously, it was located in Old Bridge, but it moved to Lakewood in 12/79 - 1/80.

1033 Entered Administration Building. The back area of the building housed the machinery they make. Mr. Martin pointed it out and explained how it worked.
There are some waste drums here with waste resin and waste isocyanate.

1033 1P-11 Photo of the above waste drums.
1S-11

1033 Readings up to 11 ppm on Oct off drums.
HNU - 0 ppm

I asked Mr. Martin about the waste oil drum that the NJDEP had said was leaking at the time of their inspection in the early 1980s. He said that the bung was loose and that the small amount of oil that had escaped was fully contained at on the top of the drum. That drum

Susan Lenzke 7/30/92

Susan Lenzke 7/30/92

Gusmer Corporation
Lakewood, NJ
J099-RP
7/30/92

(13)

was in the old drum storage area.

1039 Proceeding back to Mr. Martin's office En route, He showed us some products made with the equipment Gusmer manufactures. Products include water skis, fireplace mantles, & mantle covers.

1040 Back in Mr. Martin's office. He amended the site map I had brought along (copy from RCRA Part A) to show a demo building.

I told him he needed to contact Amy Brochu at EPA Region 2 Edison for a copy of our report. We suggested he call in in November or so. I said I'd double-check her phone number and call him back with it.

1047 Back at Suburban. Leaving Gusmer property. Site is flat. No residences within 200 feet.

1049 IP-12 Gusmer Corp. administration building
IS-12
IP-13 Gusmer Corp. manufacturing building.
IS-13

Leaving property and driving into parking lot of small unnamed facilities within 200 feet of Gusmer property but not within 200 feet of drum storage area.

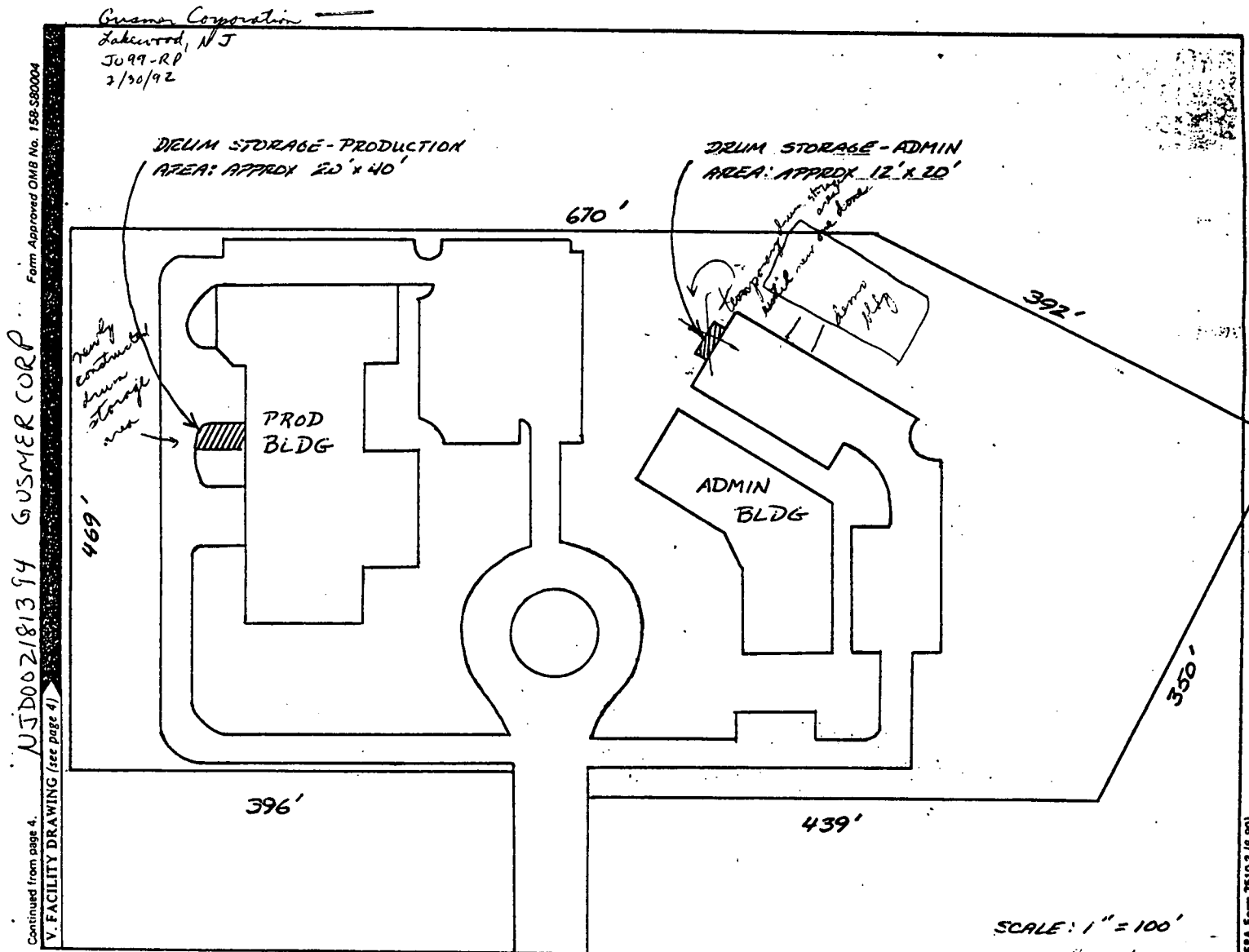
15 cars at facility within 200 feet.

Susan Henzly 8/11/92

Susan Henzly 7/30/92

Susan Henzly 7/30/92

14



Continued from page 4.
V. FACILITY DRAWING (see page 4)
NJ0002181394 GUSMER CORP.
Form Approved OMB No. 158-S80004

Gusmer Corporation
Lakewood, N.J.
J099-RP
7/30/92

(17)

PHOTOGRAPH LOG		Time
Photo No.	Description	
1P-1, 1S-1	Empty drums to be used for hazardous waste or chip disposal.	1015
1P-2, 1S-2	newly constructed drum storage area.	1015
1P-3, 1S-3	Satellite area where waste is accumulated in drum.	1016
1P-4, 1S-4	Satellite area for waste accumulation in drum.	1019
1P-5, 1S-5	Satellite area for waste accumulation in drum.	1019
1P-6, 1S-6	Satellite area for waste accumulation in drum in assembly area.	1021
1P-7, 1S-7	Temporary drum storage area located near administration building.	1025
1P-8, 1S-8	Propane tanks for heat recovery unit Two piles of roof tar on right.	1029
1P-9, 1S-9	Storm drain near (approx 15 feet from) temporary drum storage area.	1030
1P-10, 1S-10	Retention basin into which storm drain discharges.	1030
1P-11, 1S-11	Satellite area for waste accumulation in drums.	1033
1P-12, 1S-12	Gusmer Corporation administration bldg.	1049
1P-13, 1S-13	Gusmer Corporation manufacturing bldg.	1049
all photos except 1P-12 taken by Susan Lenczyk.		
1P-12 taken by Rick Kides.		

Lane Fusarag 8/1/92

Susan Lenczyk 7/31/92

ATTACHMENT B

ATTACHMENT B
PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY

ON-SITE RECONNAISSANCE: JULY 30, 1992

PHOTOGRAPH INDEX

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY
JULY 30, 1992

ALL PHOTOGRAPHS EXCEPT 1P-12 TAKEN BY SUSAN LENCZYK
1P-12 TAKEN BY NICHOLAS KIDES

<u>Photo Number</u>	<u>Description</u>	<u>Time</u>
1P-1	Empty drums to be used for hazardous waste or chip disposal.	1015
1P-2	Newly constructed drum storage area.	1015
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1P-4	Satellite area for waste accumulation in drum.	1019
1P-5	Satellite area for waste accumulation in drum.	1019
1P-6	Satellite area for waste accumulation in drum in assembly area.	1021
1P-7	Temporary 90-day drum storage area located near administration building.	1025
1P-8	Propane tank for heat recovery unit. Two pails of roof tar on right.	1029
1P-9	Storm drain near (approximately 15 feet from) temporary drum storage area.	1030
1P-10	Retention basin into which storm drain discharges.	1030
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1P-12	Gusmer Corporation administration building.	1049
1P-13	Gusmer Corporation manufacturing building.	1049

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-13

July 30, 1992
Gusmer Corporation manufacturing building.

1049

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-11

July 30, 1992

1033

Satellite area for waste accumulation in drums.



1P-12

July 30, 1992

1049

Gusmer Corporation administration building.

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-9

July 30, 1992

1030

Storm drain near (approximately 15 feet from) temporary
drum storage area.



1P-10

July 30, 1992

1030

Retention basin into which storm drain discharges.

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-7

July 30, 1992

1025

Temporary 90-day drum storage area located near
administration building.



1P-8

July 30, 1992

1029

Propane tank for heat recovery unit. Two pails of
roof tar on right.

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-6

July 30, 1992
Satellite area for waste accumulation in drum
in assembly area.

1021

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-5

July 30, 1992
Satellite area for waste accumulation in drum.

1019

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-4

July 30, 1992
Satellite area for waste accumulation in drum.

1019

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-3

July 30, 1992
Satellite area where waste is accumulated in drum.

1016

PHOTOGRAPH LOG

GUSMER CORPORATION
LAKEWOOD, NEW JERSEY



1P-1

July 30, 1992

1015

Empty drums to be used for hazardous waste or
chip disposal.



1P-2

July 30, 1992

1015

Newly constructed drum storage area.